

PeggyAnn Milton, McLean County Clerk
115 E Washington Street, Room 102
PO Box 2400
Bloomington, IL 61702-2400
(309) 888-5190 Fax (309) 888-5932
E-mail: peggyann.milton@mcleancountyil.gov Website: www.mcleancountyil.gov/countyclerk

Application for Class E Retailer's License

Pursuant to:
McLean County Liquor Control Ordinance
For the retail sale of beer or wine for consumption on the premises
specified in connection with a one-day
special event held by a non-profit organization:

(1) **Name of Organization:** _____

(2) **Mailing Address:** _____

(3) **Telephone Number :** (____) _____ **Fax Number :** (____) _____

(4) **Email Address:** _____

(5) **Names, Addresses, and Titles of all officers and directors of organization:**

NAME	ADDRESS	TITLE

(6) **Description of the One-Day Special Event:**

Type of Event: _____

Date to be held: _____ Hours: _____

Location: _____

(7) **Has your organization obtained a Special Event Permit from the McLean County Building and Zoning Department? (check one) ___ Yes ___ No** (If no, a special event permit must be obtained from the McLean County Building and Zoning Department **before** a Class E Liquor License can be issued.)

(8) **Will food be served or available? (check one) ___ Yes ___ No** (If yes, a food permit must be obtained from the McLean County Health Department **before** a Class E Liquor License can be issued.)

- (9) **Attach** to this Application a Certificate of Insurance issued in compliance with Paragraph (E) of Section 31.22 in the McLean County Liquor Control Ordinance.

Additional Statements by Applicant:

The applicant is not disqualified from receiving a liquor license by reason of any provisions of the laws of the State of Illinois.

The applicant is completely familiar with the terms and provisions of the McLean County Liquor Control Ordinance, McLean County Food Services Establishment Ordinance, and McLean County Zoning Ordinance.

The applicant has/has not made application for a liquor license on the same or other premises which has been either denied, suspended, or revoked. If **has**, attach a statement as to the date, place, and reasons therefore.

IN WITNESS WHEREOF, the undersigned organization has caused the Liquor License Application to be executed in its name by _____ its President, attested by _____ its Secretary, this ____ day of _____, 200____.

(Exact Organization Title)

(President or Vice President)

Attest:

(Secretary or Assistant Secretary)

I, _____, a Notary Public do hereby certify that on the _____ day of _____, 200_____, personally appeared before me _____ who declares _____ he is _____ President of the organization executing the foregoing document, and being first and duly sworn, acknowledges that _____ he signed the foregoing document in the capacity therein set forth and declares that the statements therein contained are true.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year before written.

[SEAL]

(Notary Public)

This application shall be accompanied by \$45.00. Make Check payable to McLean County Clerk.

Issuance of a County license as a result of this application does not relieve the applicant from obtaining a Special Event License from the Illinois Control Commission.